CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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STATE ZP CODE	NAME (LAST)	учения при		DAYTIME TELEPHONE NUMBER
STATE ZIP CODE OPTIONAL FAX FEMAL ADDRESS (LANG) use business address) F.O. Box 3006 Lodi CA 95241-1910	Hitchcock	Susan Hitchcock	Yvonne	(\$09)\\333-6702
F.O. Box 3006 Lodi	MAILING ADDRESS STREET (May use business address)	ÇITY	STATE ZIP CODE	OPTIONAL: FAX TE-MAIL ADDRESS
Name of Office, Agency, or Court: Lodi City Council Division, Board, Oistrict, if applicable: Your Position: Council Member *** If filing for multiple positions, list additional agency(les)/ position(s). (Attach a separate sheet if necessary.) Agency: Redevelopment agency of Lodi Position: Member 2. Jurisdiction of Office (Check at least one box) State County of: City of Lodi County of: Multi-County Other Other 3. Type of Statement (Check at least one box) Assuming Office/Initial Date: Other Office overed is	P.O. Box 3006	Lodi,	CA 95241-1910	
Name of Office, Agency, or Court: Lodi City Cosnell Division, Board, District, if applicable: Your Position: Council Member *** If tiling for multiple positions, list additional agency(les)/ position(s), (Attach' a separate sheet if necessary.) Agency, Redevelopment agency of Lodi Position: **Member **Desition of Office (Check at least one box) State County of Statement (Check at least one box) Assuming Office Initial Date: Annual: The period covered is January 1, 2005, through December 31, 2006. Leaving Office Date Left: Check at least one box) Leaving Office Date Left: Check at least one box) The period covered is January 1, 2005, through the date of leaving office. Or - Or - Or - Or the period covered is January 1, 2005, through the date of leaving office. Or - Or - Or - Or the period covered is January 1, 2005, through the date of leaving office. Or - Or		a itself	A Cahadula Cuma	ing Br. F. II.
Lodi City Council Division, Board, District, if applicable: Your Position: Council Merriber *** If filing for multiple positions, list additional agency((es)) position(s)* (Attach a separate sheel if necessary.) Agency: Redevelopment agency of Lodi Position: Merriber *** If filing for multiple positions, list additional agency((es)) position(s)* (Attach a separate sheel if necessary.) Agency: Redevelopment agency of Lodi Position: Merriber ** Agency: Redevelopment agency of Lodi Position: Merriber 2. Jurisdiction of Office (Check at least one box) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule B ★ Yes - schedule attached Invostments (10% or greener Currectupe) Schedule C ★ Yes - schedule attached Invostments (10% or greener Currectup	Control of the Contro	***************************************		3) y
Division, Board, District, if applicable: Your Position. Council Member I filing for multiple positions, list additional agency(ies)/ position(s): (Altach a separate sheet if necessary.) Agency: Redevelopment agency of Lodi Position: Member Redevelopment agency of Lodi Position: Member Redevelopment agency of Lodi Position: Member Schedule A-2 Yes - schedule attached Investments (loss ton present ownership) Schedule A-2 Yes - schedule attached Investments (loss ton present ownership) Schedule A-2 Yes - schedule attached Investments (loss ton present ownership) Schedule A-2 Yes - schedule attached Investments (loss ton present ownership) Schedule A-2 Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached Investments (loss ton present ownership) Schedule C Yes - schedule attached I			1	y * ** ** Singuryin elektrinininninta pune
Your Position: Council Member If filing for multiple positions, list additional agency(jes)/ position(s): (Attach a separate sheet if necessary.) Agency: Redevelopment agency of Lodi Position: Member 2. Jurisdiction of Office (Check at least one box) State County of Lodi Multi-County Other 3. Type of Statement (Check at least one box) Assuming Office/Initial Date: OT- O The period covered is January 1, 2005, through the date of leaving office. Check one OT- O The period covered is January 1, 2005, through the date of leaving office. Candidate I have disclosed interests on one or more of the attached statched schedules. Schedule A:2		able:	1 "	ules or "No reportable
Schedule A-1 Yes — schedule attached Investments (Less than 10% Ownership) Schedule A-2 Yes — schedule attached Investments (Less than 10% Ownership) Schedule A-2 Yes — schedule attached Investments (Less than 10% Ownership) Schedule A-2 Yes — schedule attached Investments (Loss or peaker Ownership) Schedule A-2 Yes — schedule attached Investments (Loss or peaker Ownership) Schedule B Yes — schedule attached Investments (Loss or peaker Ownership) Schedule C Yes — schedule attached Income. Loans, & Business Positions (Income Other than Oths and Tweel Payments) Schedule D Yes — schedule attached Income. Loans, & Business Positions (Income Other than Oths and Tweel Payments) Schedule D Yes — schedule attached Income - Gifts Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Gifts Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached Income - Travel Payments Schedule D Yes — schedule attached			I have disclosed interests	on one or more of the
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Agency: Member 2. Jurisdiction of Office (Check at least one box) □ State □ County of □ Multi-County □ Other □ Assuming Office/Initial □ Date: □ Or- □ The period covered is January 1, 2005, through the date of leaving office. □ The period covered is January 1, 2005, through the date of leaving office. □ The period covered is January 1, 2005, through the date of leaving office. □ Candidate □ Check at least one box) □ Schedule C ☑ Yes - schedule attached income. Check one proceed powers as peculiar and constant of the chair of the c	★	l l	Investments (Less than 10% (Dwnership)
Position: Member 2. Jurisdiction of Office (Check at least one box) State County of Lodi Multi-County Other 3. Type of Statement (Check at least one box) Assuming Office/Initial Annual: The period covered is January 1, 2005, through December 31, 2005. OThe period covered is	Agency: Redevelopment agen	ey of Lodi	1	
Schedule C	Position: Member		-	schedule attached
County of		(Check at least one box)		
Multi-County			· · · · · · · · · · · · · · · · · · ·	schedule attached
Other		Į.	1 Montand	schedule attached
3. Type of Statement (Check at least one box) ☐ Assuming Office/Initial Date:/ ☑ Annual: The period covered is January 1, 2005, through December 31, 2005. —Or- ○ The period covered is/ through December 31, 2005. ☐ Leaving Office Date Left:/ (Check one) ○ The period covered is January 1, 2005, through the date of leaving office. —Or- ○ The period covered is January 1, 2005, through the date of leaving office. —Or- ○ The period covered is through the date of leaving office. —Or- ○ The period covered is through the date of leaving office. —Or- ○ The period covered is through the date of leaving office. —Or- ○ The period covered is through the date of leaving office. —Or- ○ The period covered is through the date of leaving office. —Or- ○ The period covered is through the date of leaving office. —Or- ○ The period covered is through the date of leaving office. —Or- ○ The period covered is through the date of leaving office. —Or- ○ The period covered is through the date of leaving office. —Or- ○ The period covered is through the date of leaving office. —Or- ○ The period covered is through the date of leaving office. —Or- ○ The period covered is through the date of leaving office. —Or- ○ The period covered is through the date of leaving office. —Or- ○ The period covered is through the date of leaving office. —Or- ○ The period covered is through the date of leaving office.		Constraint of the Constraint o	-0	7 %
Assuming Office/Initial Date:	3 Type of Statement (C)	pock at least one box	No reportable interest	s on any schedule
Annual: The period covered is January 1, 2005, through December 31, 2005. Off- Off- Off- Off- Offe period covered is				的对象的变形,但是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
through December 31, 2005. OT- OT- OThe period covered is/, through December 31, 2005. Leaving Office Date Left:/, (Check one) OThe period covered is January 1, 2005, through the date of leaving office. OThe period covered is/, through the date of leaving office. OThe period covered is/_, through the date of leaving office. OThe period covered is/_, through the date of leaving office. OThe period covered is/_, through the date of leaving office. OThe period covered is/_, through the date of leaving office. OThe period covered is/_, through the date of leaving office. OThe period covered is/_, through the date of leaving office. OTHE PERIOD COVERED TO THE DESCRIPTION OF THE PERIOD COVERED TO THE PERIOD	*		5. Verification	
Leaving Office Date Left:	through December 31, 2005 -Or- O The period covered is		statement. I have reviewed of my knowledge the informa	this statement and to the best tion contained herein and in any
O The period covered is January 1, 2005, through the date of leaving office. O The period covered is, through the date of leaving office. Candidate O The period covered is, through the date of leaving office. Candidate Date Signed	Leaving Office Date Left:	account or account of accounts		
Candidate Candidate	O The period covered is Jar the date of leaving office. -Or- O The period covered is		Miller	4/1/06 (monty day, year) Machinak
			Affile the originally s	igned statement with your filing official.) FPPC Form 700 (2005/200

FPPC Form 700 (2005/2006) FPPC Toll-Free Helpline: 866/ASK-FPPC

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

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CALIF	ORNIA	FORM	ı 7		
FAIR FOL	TICAL PR	ACTICES	COMM	SSIO	
Name					
Susan	Hitchco	ock			
TOTAL STREET	************	····	y y,amatrojnoko/s/17 10	Machine inch	

> NAME OF BUSINESS ENTITY	> NAME OF BUSINESS ENTITY
Farmers and Merchants Bank	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Banking and Lending	
FAIR MARKET VALUE	FAIR MARKET VALUE
S2,000 - \$10,000 X \$10,001 - \$100,000	\$2,000 - \$10,000\$10,001 - \$100,000
\$100,001 \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT
NATURE OF INVESTMENT	Stock
Steck Steck Steel	lugured
Other (Describe)	Other (Describe)
IF APPLICABLE LIST DATE:	IF APPLICABLE, LIST DATE:
	/ 05 / 05 ACQUIRED DISPOSED
ACQUIRED DISPOSED	ACQUIRED DISPOSED
> NAME OF BUSINESS ENTITY	> NAME OF BUSINESS ENTITY
Pacific Gas and Electric	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Utility Company	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000
\$100,001 -\$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	The state of the s
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock %:	Stock
Other	Other
(Describe)	(Describe)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
> NAME OF BUSINESS ENTITY	> NAME OF BUSINESS ENTITY
Heron Door, LCC	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
manufacture and sell doors	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000
\$100,001 \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
tanned to the state of the stat	
NATURE OF INVESTMENT	NATURE OF INVESTMENT
☐ Stock	☐ Stock
Other parnership agreement	Other
(Describe)	(Describe)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
4 / /05 / /05	, , 05 <u>, , 05</u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
**************************************	•
Comments:	

SCHEDULE B Interests in Real Property

(Including Rental Income)

	CALIFORNIA FORM 700
	FAIR FOLITICAL PRACTICES COMMISSION
A-MANAGA MANAGA	Name
distance of the second	Susan Hitchcok
Ĺ	

STREET ADDRESS OR PRECISE LOCATION	> STREET ADDRESS OR PRECISE LOCATION
615 Hutchins	93 Genie Way
CITY	CITY
Lodi, CA 95242	Lodi,CA 95242
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: [] \$2,000 - \$10,000
\$2,000 - \$10,000	S10 001 - \$100 000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	▼ \$100,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust	Ownership/Deed of Trust Easement
Leasehold Yrs remaining Other	LeaseholdOther
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$498 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
X \$10,001 - \$100,000	
SOURCES OF PIENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. Billy Smith	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
NAME OF LENDER®	NAME OF LENDER*
	Wells Fargo
ADDRESS	ADDRESS
<u> </u>	120 W. Lodi, Ave. Lodi, CA 95240
BUSINESS ACTIVITY OF LENDER	BUSINESS ACTIVITY OF LENDER
	Banking and Lending
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
%	5.0 % None 25
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	▼ \$10,001 - \$100,000 □ OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable
omments:	

* Loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status are not reportable.

SCHEDULE B Interests in Real Property

(including Rental Income)

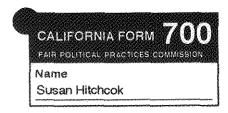
A	
W	CALIFORNIA FORM
	FAIR POLITICAL PRACTICES COMMISSION
	Name
	Susan Hitchcok

STREET ADDRESS OR PRECISE LOCATION	> STREET ADDRESS OR PRECISE LOCATION
240 E. Vine	314 W. Walnut
CITY	CITY
Lodi, CA 95242	Lodi,CA 95242
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
Leasehold Yrs. remaining Other	LeaseholdOther
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$\bigs\\$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
▼ \$10,001 - \$100,000 □ OVER \$100,000	▼ \$10,001 - \$100,000 □ OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
NAME OF LENDER*	NAME OF LENDER*
Farmers and Merchants Bank	Farmer and Merchants Bank
ADDRESS	ADDRESS
Church and Pine Lodi, CA 95240	Church and Pine Lodi, CA 95240
BUSINESS ACTIVITY OF LENDER	BUSINESS ACTIVITY OF LENDER
Baning and Lending	Banking and Lending
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
	Drima 25
Prime % None 20	None 25
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \[\] \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	X \$10,001 - \$100,000
Guarantor, if applicable	Guarantor, if applicable

* Loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status are not reportable.

SCHEDULE B Interests in Real Property

(Including Rental Income)



>	STREET ADDRESS OR PRECISE LOCATION >	STREET ADDRESS OR PRECISE LOCATION
	1614 Cowens	
	CITY	CITY
	Lodi, CA 95242	
	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
	\$2,000 - \$10,000 \$2,000 - \$10,000 05	\$2,000 - \$10,000 / \(\sqrt{05} \)
	ACOURED DISPOSED	\$10,001 - \$100,000 ACQUIRED DISPOSED
	\$100,001 - \$1,000,000	Over \$1,000,000
	NATURE OF INTEREST	NATURE OF INTEREST
	Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
	Leasehold	Leasehold
	Yrs. remaining. Other	Yrs. remaining Other
	IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
	S0 - \$499 S500 - \$1,000 S1,001 - \$10,000	S0 - \$499 S500 - \$1,000 S1,001 - \$10,000
	S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000
	SOURCES OF RENTAL INCOME: If you own a 10% or greater	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of
	interest, list the name of each tenant that is a single source of income of \$10,000 or more.	income of \$10,000 or more.
		\$100000 (Programmer Medical Action (1907) (Programmer Action (1907) (P
	NAME OF LENDER*	NAME OF LENDER*
	Guild Mortgage	
	ADDRESS	ADDRESS
	9160 Gramercy Dr. San Diego	
	BUSINESS ACTIVITY OF LENDER	BUSINESS ACTIVITY OF LENDER
	Mortgage Banking	
	INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
	6 % None 15	% \[\] None
		LIGHTOT ALL MOS AUDITO ASSAULT ASSAULT
	HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,000	HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000
		- Control Cont
	☐ \$10,001 - \$100,000 🗵 OVER \$100,000	X \$10,001 - \$100,000 ☐ OVER \$100,000
	Guarantor, il applicable	Guarantor, if applicable
_		

* Loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status are not reportable.

SCHEDULE C Income, Loans & Business Positions

(Other than Gifts and Travel Payments)

Susan Hite	choock				
Name					
FAIR POLITICA	L PRACTIC	CES CO	MMISS	ION	
CALIFORI	NIA FO	ЯM	/\	M	
					4

1. INCOME RECEIVED	NAME OF SOURCE OF INCOME
NAME OF SOURCE OF INCOME	Heron Door, LCC
Town and Country Property	ADDRESS
ADDRESS	
318 W. Pine St, Lodi, CA 95240	P.O. Box 934 Lodi, CA. 95241 BUSINESS ACTIVITY, IF ANY, OF SOURCE
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOUNCE
Real Estate Sales	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
☐ \$500 - \$1,000 ※ \$1,001 - \$10,000	☐ \$500 - \$1,000 ※ \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
	La de la constanta de la const
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Spouse's income Loan repayment	Salary Spouse's income Loan repayment
Sale of	Sale of
(Property, car, boat, etc.)	(Property, car, boet, etc.)
Commission of Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
	Garant
%	
<u> </u>	1 <u> </u>
CT Other	Other Partner return
Other (Oescribe)	Other Partner return (Describe)
Other (Describe)	Other Partner return (Describe)
(Describe)	(Describe)
(Describe) 2. LOAN RECEIVED You are not required to report loans from commercial lend	ing institutions, or any indebtedness created as part of a
2 LOAN RECEIVED You are not required to report loans from commercial lend retail installment or credit card transaction, made in the lend	ing institutions, or any indebtedness created as part of a nder's regular course of business on terms available to
You are not required to report loans from commercial lend retail installment or credit card transaction, made in the ler members of the public without regard to your official status	ing institutions, or any indebtedness created as part of a nder's regular course of business on terms available to
You are not required to report loans from commercial lend retail installment or credit card transaction, made in the ler members of the public without regard to your official status regular course of business must be disclosed as follows:	ing institutions, or any indebtedness created as part of a nder's regular course of business on terms available to s. Personal loans and loans received not in a lender's
You are not required to report loans from commercial lend retail installment or credit card transaction, made in the ler members of the public without regard to your official status	ing institutions, or any indebtedness created as part of a nder's regular course of business on terms available to
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